

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nevada State Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Carol Chesnut

Mailing Address 7537 Dry Pines Cir.

City

Las Vegas

State

NV

Zip Code

89129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 7

Transaction ID: 11ai-000014059

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Heather Hay Murren

Mailing Address 2000 Gray Eagle Way

City

Las Vegas

State

NV

Zip Code

89117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nevada Cancer Institute

Occupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 7

Transaction ID: 11ai-000014015

Amount of Each Receipt this Period

10000.00

**C.**

Full Name (Last, First, Middle Initial)

Randall Naiman

Mailing Address 4660 La Jolla Village Dr.

City

San Diego

State

CA

Zip Code

92122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 7

Transaction ID: 11ai-000014107

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

12200.00

**TOTAL** This Period (last page this line number only) .....